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Summary

ENDOSCOPIC ULTRASOUND-GUIDED GALLBLADDER DRAINAGE USING LUMEN-APPOSING METAL STENTS FOR NON-SURGICAL CANDIDATES WITH ACUTE CHOLECYSTITIS: A PROSPECTIVE COHORT STUDY

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Prospective study of EUS-guided gallbladder drainage using lumen-apposing metal stents in high-risk patients with acute cholecystitis achieved 100% technical and clinical success with low adverse event rates over six-month follow-up.

KEY POINTS

- Twenty-four high-risk non-surgical patients (mean age 75.5 years, mean Charlson Comorbidity Index 5.1, mean ASA score 3) underwent EUS-guided gallbladder drainage with lumen-apposing metal stents from July 2024 to April 2025.
- Technical and clinical success was achieved in 100% of cases, with significant reduction in inflammatory markers observed.
- Adverse events occurred in 8.33% of patients, comprising two stent occlusions requiring reintervention and one case of atrial fibrillation driven by underlying sepsis requiring high-dependency unit admission.
- Over an average follow-up of 155 days, there were no procedure-related deaths and no recurrences of acute cholecystitis; one death occurred 23 days post-procedure and was deemed unrelated.
- The authors conclude that EUS-guided gallbladder drainage is an effective and safe option for non-surgical candidates with acute cholecystitis, though larger studies are needed for validation.

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